
A BILL FOR AN ACT

RELATING TO PEER SUPPORT SPECIALISTS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that the federal Centers
2 for Medicare and Medicaid Services recognizes that the
3 experiences of peer support specialists, as part of an evidence-
4 based model of care, can be an important component in the
5 delivery of effective mental and behavioral health treatment.

6 The legislature further finds that the federal Substance
7 Abuse and Mental Health Services Administration identifies peer
8 support as one of the six guiding principles of trauma-informed
9 care. Peer support specialists use strengths-based approaches
10 that emphasize physical, psychological, and emotional safety and
11 create opportunities to rebuild a sense of control and
12 empowerment.

13 The legislature also finds that research shows that peer
14 support is effective for improving behavioral health outcomes.
15 Benefits of peer support include reduced hospital admission
16 rates, longer community tenure, increased social support and
17 social functioning, decreased substance use and depression,



1 raised empowerment scores, and increased engagement in self-care
2 and wellness. Peer support provides benefits not only to
3 individuals suffering from mental health disorders and substance
4 use disorders, but also to individuals who are experiencing
5 homelessness, involved in the child welfare system, survivors
6 and responders of disasters, involved in the correctional and
7 juvenile justice systems, and caregivers of youth involved in
8 one or more child-serving systems.

9 The legislature additionally finds that Act 291, Session
10 Laws of Hawaii 2022, established on a temporary basis the office
11 of wellness and resilience within the office of the governor.
12 The office was established to address the various barriers that
13 impact the physical, social, and emotional well-being of all
14 people in the State by building wellness and resilience through
15 trauma-informed, strength-based strategies; and to support
16 department and agencies in their individual efforts to address
17 trauma-informed care and move toward a collaborative, shared
18 purpose of collective system reform.

19 The legislature finds that by establishing a working group
20 within the office of wellness and resilience that comprises
21 state departments and agencies that engage with peer support



1 specialists, community-based organizations, contracted service
2 providers, adults, youth, parents, and caregivers with lived
3 experiences, the working group will contribute to the
4 development of a framework to elevate the role of peer support
5 specialists and enhance their ability to serve individuals in
6 need.

7 The purpose of this Act is to establish a working group to
8 develop and make recommendations for a framework for peer
9 support specialists in the State.

10 SECTION 2. (a) There is established within the office of
11 wellness and resilience for administrative purposes a peer
12 support specialist working group. The working group shall
13 consist of the following members:

- 14 (1) The director of the office of wellness and resilience,
15 or the director's designee, who shall serve as the
16 chairperson of the working group;
- 17 (2) The director of health, or the director's designee;
- 18 (3) The superintendent of education, or the
19 superintendent's designee;
- 20 (4) The director of corrections and rehabilitation, or the
21 director's designee;



- 1 (5) A member of the Hawaii state judiciary, to be
- 2 appointed by the chief justice;
- 3 (6) A member of the department of health's adult mental
- 4 health division representing the administrator of the
- 5 Hawaii certified peer specialist program;
- 6 (7) A member of the department of health's child and
- 7 adolescent mental health division representing the
- 8 administrator of the peer support specialist program
- 9 carried out within the division;
- 10 (8) The administrator of med-QUEST, or the administrator's
- 11 designee;
- 12 (9) The governor's coordinator on homelessness, or the
- 13 coordinator's designee;
- 14 (10) Two members of the nonprofit sector, who shall be
- 15 invited by the chairperson; and
- 16 (11) A member from each of the following constituencies,
- 17 whom the chairperson shall invite to participate in
- 18 the working group;
- 19 (A) An individual with lived experience as a child or
- 20 youth in the child welfare system;



- 1 (B) An individual with lived experience in the
2 juvenile justice system or an individual with
3 lived experience in the adult correctional
4 system;
- 5 (C) Two caregivers with lived experience as the
6 caregiver of a child or youth in behavioral
7 health, child welfare, and the juvenile justice
8 systems;
- 9 (D) An individual with lived experience with recovery
10 from substance abuse and lived experience being
11 homeless; and
- 12 (E) An individual with lived experience navigating
13 the mental health system either as a child or
14 youth or as an adult.

15 (b) The working group shall develop and make
16 recommendations for a framework for peer support specialists in
17 the State. The working group shall:

- 18 (1) Identify best practices and create, develop, and adopt
19 a statewide framework for peer support specialists.

20 The framework shall include:



- 1 (A) Clear roles and definitions of peer support
- 2 specialists, youth peer support specialists,
- 3 adult peer support specialists, and caregiver
- 4 peer support specialists;
- 5 (B) Ethics, values, and standards required of peer
- 6 support specialists;
- 7 (C) Recommendations on whether the State should
- 8 require youth peer support specialists, adult
- 9 peer support specialists, and caregiver peer
- 10 support specialists to undertake the same
- 11 training, certification, and credentialing
- 12 process or whether the training should be
- 13 individualized based on the type of peer support;
- 14 (D) Recommendations on how to require peer support
- 15 specialists in state-awarded contracts; and
- 16 (E) An implementation and quality improvement plan,
- 17 consisting of an evaluation plan with coordinated
- 18 data collection and suggested metrics for
- 19 assessing ongoing progress of the framework;
- 20 (2) Identify a trauma-informed model of supervision of
- 21 peer support specialists to support competent and



1 ethical delivery of services that support continued
2 development of peer support specialist abilities and
3 support navigation of state systems, including the
4 certification and credentialing process, integration
5 in decision making and program development processes,
6 debriefing from meetings, training and technical
7 assistance, and programs to support the well-being of
8 peer support specialists;

9 (3) Provide an inventory of current use of peer support
10 specialists within and across public and private
11 agencies and departments; and

12 (4) Develop a sustainability plan that includes
13 identification of state and federal funding streams to
14 incorporate requirements to establish peer support as
15 a medicaid billable service.

16 (c) Members of the peer support specialist working group
17 who are employed by the State and serving in that official
18 capacity on the working group shall serve without compensation
19 but shall be reimbursed for reasonable expenses necessary for
20 the performance of their duties, including travel expenses.

21 Other members of the working group not employed by the State



1 shall receive compensation for time spent on working group
2 meetings and related work and travel expenses.

3 (d) The office of wellness and resilience may contract
4 with an administrative facilitator to provide necessary support
5 for the peer support specialist working group in carrying out
6 its duties.

7 (e) The peer support specialist working group shall submit
8 a report of its findings and recommendations, including any
9 proposed legislation, to the legislature no later than twenty
10 days prior to the convening of the regular session of 2025.

11 (f) The peer support specialist working group shall cease
12 to exist on June 30, 2025.

13 SECTION 3. There is appropriated out of the general
14 revenues of the State of Hawaii the sum of \$66,400 or so much
15 thereof as may be necessary for fiscal year 2024-2025 for the
16 peer support specialist working group established pursuant to
17 this Act, including for the office of wellness and resilience to
18 contract with an administrative facilitator to provide necessary
19 support for the working group in carrying out its duties.

20 The sum appropriated shall be expended by the office of the
21 governor for the purposes of this Act.



1 SECTION 4. In accordance with section 9 of article VII of
 2 the Hawaii State Constitution and sections 37-91 and 37-93,
 3 Hawaii Revised Statutes, the legislature has determined that the
 4 appropriations contained in H.B. No. , will cause the state
 5 general fund expenditure ceiling for fiscal year 2024-2025 to be
 6 exceeded by \$ or per cent. In addition, the
 7 appropriation contained in this Act will cause the general fund
 8 expenditure ceiling for fiscal year 2024-2025 to be further
 9 exceeded by \$ or per cent. The combined total
 10 amount of general fund appropriations contained in only these
 11 two Acts will cause the state general fund expenditure ceiling
 12 for fiscal year 2024-2025 to be exceeded by
 13 \$ or per cent. The reasons for exceeding the
 14 general fund expenditure ceiling are that:

- 15 (1) The appropriation made in this Act is necessary to
- 16 serve the public interest; and
- 17 (2) The appropriation made in this Act meets the needs
- 18 addressed by this Act.

19 SECTION 5. This Act shall take effect on July 1, 3000.



Report Title:

Peer Support Specialist; Working Group; Office of Wellness and Resilience; Appropriation; Expenditure Ceiling

Description:

Establishes a working group within the Office of Wellness and Resilience to create a statewide framework for peer support specialists. Appropriates funds for hiring an administrative facilitator to provide necessary support for the peer support specialist working group. Effective 7/1/3000. (HD1)

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